

QC  
#14QC  
#14

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	3-17-98
FORMALITY REVIEW	1/15/98	62591	5/19/98

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
(Through numeral) Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Date			
Final	Original	Original	Original	Original
1	✓	✓	✓	✓
2	✓	✓	✓	✓
3	✓	✓	✓	✓
4	✓	✓	✓	✓
5	✓	✓	✓	✓
6	✓	✓	✓	✓
7	✓	✓	✓	✓
8	✓	✓	✓	✓
9	✓	✓	✓	✓
10	✓	✓	✓	✓
11	✓	✓	✓	✓
12	✓	✓	✓	✓
13	✓	✓	✓	✓
14	✓	✓	✓	✓
15	✓	✓	✓	✓
16	✓	✓	✓	✓
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18	✓	✓	✓	✓
19	✓	✓	✓	✓
20	✓	✓	✓	✓
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Claim	Date			
Final	Original	Original	Original	Original
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Claim	Date			
Final	Original	Original	Original	Original
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If more than 150 claims or 10 actions  
staple additional sheet here

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